Clinical Scores for CalPERS Basic Plans

(Originally prepared for CalPERS Health Plan Chooser 2011-2012)

The Clinical Scores are based on objective quality of care measures that are part of a national set of quality standards called the Healthcare Effectiveness Data and Information Set, or HEDIS. Over 90 percent of the health plans in the United States use HEDIS measures.

For a health plan to get a high Clinical Score, the following things need to happen:

- Patients need to see a doctor;
- Doctors need to order the right care;
- Patients need to receive the care and be an active partner in treatment; and
- Health plans need to receive the data showing that the patient received the care.

We are presenting Clinical Scores only for Basic plans, not for Medicare Supplemental plans. The Health Maintenance Organization (HMO) plans in the table below are Blue Shield of California (BSC) and Kaiser Permanente (KP), and the Preferred Provider Organization (PPO) plans are PERSCare, PERS Choice, and PERS Select.

The Clinical Scores for HMOs and PPOs in the table below are not strictly comparable for two reasons. First, the HMO scores include data from all California members of the HMOs, not only CalPERS members. But the PPO scores include data from CalPERS members only. Second, for some of the measures (marked with an asterisk "*"), a PPO's score may be lower than an HMO's score solely because of the way the data are collected, not necessarily because the PPO's actual performance is worse. For all measures, PPOs and HMOs collect information from claims or other administrative data. For those measures marked with an asterisk, however, HMOs gather additional information from patients' medical records.

These Clinical Scores are only a guide. Whether you choose an HMO or a PPO, you can increase the quality of care you receive by seeing your doctor, being an active partner in your care, and following through with the treatment plan. There are many resources to help you receive the best care; the CalPERS Health Benefit Summary booklet provides additional information on these resources.

Table: Clinical Scores by Plan

Measure	BSC	KP	PERSCare	PERS Choice	PERS Select
Childhood Immunizations					
Childhood Immunizations - Combination 3*	73.7%	83.6%	15.9%	23.1%	16.7%
Childhood Immunizations - Combination 10*	14.1%	20.4%	2.3%	3.3%	1.7%
Immunizations for Adolescents					
Meningococcal Vaccine*	49.5%	60.7%	43.9%	33.4%	23.2%
Tdap or Td*	57.9%	65.9%	56.1%	42.7%	26.8%
Combination 1*	47.0%	59.0%	41.8%	29.7%	17.9%

Measure	BSC	KP	PERSCare	PERS Choice	PERS Select
Other Prevention and Screening					
Adult BMI Assessment*	40.9%	95.6%	1.4%	1.3%	1.2%
Weight Assessment and Counseling for					
Nutrition and Physical Activity for	23.9%	87.0%	0.2%	0.4%	0.2%
Children/Adolescent - Total BMI*					
Weight Assessment and Counseling for					
Nutrition and Physical Activity for	23.8%	84.4%	_	_	_
Children/Adolescent - 3-11 Years BMI*					
Weight Assessment and Counseling for					
Nutrition and Physical Activity for	24.0%	90.0%	_	_	_
Children/Adolescent - 12-17 Years BMI*					
Breast Cancer Screening - Total	73.6%	82.2%	71.3%	68.1%	65.4%
Cervical Cancer Screening	77.0%	86.5%	73.2%	73.5%	79.1%
Colorectal Cancer Screening	64.9%	72.5%	48.9%	46.3%	44.3%
Chlamydia Screening in Women - Age 16- 20	40.1%	60.8%	34.5%	36.2%	31.1%
Chlamydia Screening in Women - Age 21-					
24	47.1%	69.1%	40.0%	42.2%	34.2%
Chlamydia Screening in Women - Total	43.2%	65.0%	37.1%	38.8%	32.7%
Respiratory Conditions					
Appropriate Testing for Children with	50.1%	92.7%	NR	NR	NR
Pharyngitis	30.170	92.1 /0	INIX	IVIX	IVIX
Appropriate Treatment for Children with	87.4%	97.6%	NR	NR	NR
Upper Respiratory Infection	07.470	37.070	IVIX	IVIX	IVIX
Avoidance of Antibiotic Treatment in	20.4%	47.8%	26.9%	25.2%	25.3%
Adults with Acute Bronchitis	20.470	47.070	20.070	20.270	20.070
Use of Spirometry Testing in the	30.5%	51.6%	40.4%	35.3%	SS
Assessment and Diagnosis of COPD	00.070	01.070	10.170	00.070	
Pharmacotherapy Management of COPD					
Exacerbation - Dispensed systemic	63.3%	72.7%	SS	51.7%	SS
corticosteroid within 14 days of event					
Pharmacotherapy Management of COPD	77.00/	00.00/	00	05 50/	00
Exacerbation - Dispensed a	77.8%	88.0%	SS	65.5%	SS
bronchodilator with 30 days of event					
Use of Appropriate Medications for People	96.5%	97.9%	NR	NR	NR
with Asthma - Age 5-11					
Use of Appropriate Medications for People	91.5%	95.4%	NR	NR	NR
with Asthma - Age 12-50 Use of Appropriate Medications for People					
with Asthma - Total	92.7%	96.0%	NR	NR	NR
Cardiovascular Conditions					
Cholesterol Management for Patients with					
Cardiovascular Conditions - LDL-C	89.2%	95.3%	86.1%	84.4%	78.6%
Screening*	09.2 /0	JJ.J/0	00.170	UT.4 /0	10.070
Cholesterol Management for Patients with					
Cardiovascular Conditions - LDL-C Level	59.6%	74.3%			!
of <100 mg/dL*	33.070	. 1.5 /0			
Controlling High Blood Pressure*	64.8%	83.7%			_
Persistence of Beta-Blocker Treatment					
After a Heart Attack	73.5%	83.6%	SS	75.4%	SS

Measure	BSC	KP	PERSCare	PERS Choice	PERS Select
Diabetes					
Comprehensive Diabetes Care - HbA1c Test*	90.4%	93.6%	84.2%	82.2%	79.7%
Comprehensive Diabetes Care - HbA1c level <8.0 percent*	65.4%	66.7%	_	_	_
Comprehensive Diabetes Care - HbA1c level ≤9.0 percent*‡	75.9%	79.7%	_	_	_
Comprehensive Diabetes Care - Retinal Exam*	64.5%	75.4%	30.2%	23.2%	18.3%
Comprehensive Diabetes Care - LDL-C Screening*	85.7%	93.3%	81.2%	79.2%	77.9%
Comprehensive Diabetes Care - LDL-C Level of <100 mg/dL*	49.6%	66.6%			
Comprehensive Diabetes Care - Medical Attention for Nephropathy*	87.1%	94.0%	81.4%	75.2%	70.6%
Comprehensive Diabetes Care - Blood Pressure Control (<140/90)*	68.7%	82.2%	_	_	
Musculoskeletal Conditions Disease Modifying Anti-Rheumatic Drug Therapy in Rheumatoid Arthritis	87.1%	91.8%	83.3%	82.7%	SS
Use of Imaging Studies for Low Back Pain	77.9%	83.9%	80.7%	82.4%	85.3%
Behavioral Health Antidepressant Medication Management - Effective Acute Phase Treatment	60.3%	82.4%	75.0%	73.5%	72.9%
Antidepressant Medication Management - Effective Continuation Phase Treatment	46.7%	60.6%	60.0%	59.3%	60.4%
Follow-up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder Medication - Initiation Phase	40.0%	40.3%	SS	43.8%	SS
Follow-up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder Medication - Continuation and Maintenance Phase	42.8%	40.0%	SS	41.1%	SS
Follow-up After Hospitalization for Mental Illness - within 7 days of hospital discharge	71.3%	75.8%	29.7%	48.2%	SS
Follow-up After Hospitalization for Mental Illness - within 30 days of hospital discharge	84.3%	85.8%	45.9%	63.3%	SS
Medication Management					
Annual Monitoring for Patients on Persistent Medications - ACE Inhibitors or ARBs	78.5%	83.1%	82.2%	79.1%	76.3%
Annual Monitoring for Patients on Persistent Medications - Digoxin	84.2%	91.8%	85.4%	85.8%	SS
Annual Monitoring for Patients on Persistent Medications - Diuretics	77.3%	80.1%	83.6%	79.0%	77.8%
Annual Monitoring for Patients on Persistent Medications - Anticonvulsants	53.5%	65.5%	54.6%	54.8%	SS
Annual Monitoring for Patients on Persistent Medications - Total	77.6%	81.5%	82.1%	78.6%	76.1%

Measure	BSC	KP	PERSCare	PERS Choice	PERS Select
Access/Availability of Care					
Prenatal and Postpartum Care - Timely Initiation of Prenatal Care*	91.9%	97.7%	71.6%	62.7%	64.9%
Prenatal and Postpartum Care - Postpartum Care*	82.4%	91.1%	29.9%	36.8%	30.6%
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment - Initiation - Age 13-17	43.2%	45.0%	_	_	_
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment - Initiation - Age 18+	44.4%	34.9%	_		_
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment - Initiation - Total	44.3%	35.5%	31.2%	32.5%	22.9%
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment - Engagement - Age 13-17	9.0%	25.2%			_
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment - Engagement - Age 18+	10.9%	17.0%	_	_	_
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment - Engagement - Total	10.7%	17.5%	8.5%	10.0%	11.4%

Notes for the Table

BSC denotes Blue Shield of California, KP denotes Kaiser Permanente, NR denotes "Not Reported" because the auditor determined that a rate was unreliable, and SS denotes "Small Sample" because the sample size was too small to report a valid result. Dashes (—) indicate measures that are not collected for the PPO plans (PERSCare, PERS Choice, and PERS Select).

^{*} For measures marked with an asterisk, the HMOs (BSC and KP) also gather information from medical records. Scores for PPO plans may be lower than scores of HMO plans for these measures because PPOs are scored without the medical record information.

[‡] A higher score is better for this measure, which is the "reverse" of the "Poor HbA1c Control" HEDIS measure found in many publications.